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Substitute for Form PTO-875										10/786940		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OTHER THAN OR SMALL ENTITY		
	FOR		NUMBER FILED		NUMBE	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))									s	OR		\$
TOTAL CLAIMS 37 CFR-1.16(c))			<u></u>	minus 20	<b>.</b>	•		x s=		- OR	X:\$ =	
NDEPENDENT CLAIMS 37 CFR 1.16(b))				minus 3	= .		]_	x s=		OR	x s=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						]-	+ s =		OR	+5 =		
* If the difference in column 1 is less than zero, enter "0" in column 2.							•	TOTAL		OR	TOTAL	
. 1	11/0	LAIN	IS AS AME	ENDED	– PART II						•	
9	10/05	(C	olumn 1)		(Column 2)	(Column 3)		SMALL E	NTITY	OR		THAN
Z LN		RE	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.16(c))		7	Minus	20_	=	] .	x s=		OR	x s=	
W W	Independent (37 CFR 1.16(b))	$L_{\mathcal{C}}$	<del>\</del>	Minus	3	=		x s=		_OR	x s =	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ s =		OR	+ 5	
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
			olumn 1)		(Column 2)	(Column 3)	_					
ENT B		RE	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE	:	RATE	ADDI- TJONAL 'FEE!-"
ENDMI	Total (37 CFR 1.16(c))	•		Minus	••	=		x s=		OR	x s =	
Z U	Independent (37_CFR_1.16(b))			Minus			_	-x-s=-		OR .	=	
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ s =		OR :		
				•	<del></del>		J	TOTAL ADD'L FEE		OR .	TOTAL ADD'L FEE	
		(C	olumn 1)		(Column 2)	(Column 3)						
ENT C		RE	CLAIMS EMAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIDIANI FEE		RATE	ADDI- TIONAL- FEE
	Total (37 CFR 1.16(c))	Ĺ		Minus		=		x s =		OR	x s =	
AMENDM	Independent (37 CFR 1,16(b))			Minus	•••	=	1	x s =	_	OR	x s =	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ 5 =		OR .	+ 5 =	
		•	_					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	" If the "Highest If the "Highest i The "Highest N	Numt Numb umbe	er Previousty er Previousty r Previousty f	Paid For Paid For Paid For (	y in column 2, writ IN THIS SPACE IN THIS SPACE Total or Independ R 1.16. The info	is less than 20, is less than 3, of lent) is the high	ente est	r "3". number found in	the appropria	te box in c	olumn 1	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.